

## **Proportion of Visits to Health Care Providers Resulting in Request of Stool Samples: Data from the National Ambulatory Medical Care Survey (NAMCS) and the Foodborne Diseases Active Surveillance Network (FoodNet) Population Survey**

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**Background:** Studies are needed to determine the frequency of requested stool samples to make accurate estimates of the human burden of foodborne diseases, and to evaluate clinical practice guidelines for patients with acute diarrhea. We used data from the National Ambulatory Medical Care Survey (NAMCS) to validate Foodborne Diseases Active Surveillance Network (FoodNet) Population Survey estimates of the proportion of medical visits for diarrhea that resulted in the submission of a stool sample.

**Methods:** Using NAMCS data from 2000 to 2002, we determined the number of visits for diarrhea and, among these, the proportion of visits resulting in submission of a stool sample. Visits with respiratory symptoms, a diagnosis of influenza or chronic diarrhea were excluded. We compared the results to weighted FoodNet Population Survey data from 2000-2001 and 2002-2003.

**Results:** In NAMCS, a total of 19,888 patient record forms were completed between 2000 and 2002, which account for an estimated 328 million patient visits over a 3-year period. In 2000 to 2002 combined, 5.6 million patients reported diarrhea as a reason for visit. Of those visits for diarrhea, approximately 827 thousand (14.7%) resulted in submission of a stool sample. In the FoodNet Population Survey, of an estimated 775,575 respondents visiting a health care provider for diarrhea, approximately 137 thousand (17.7%) reported submitting a stool sample.

**Conclusion:** The proportion of medical visits for diarrhea resulting in a stool sample was under 20% in both of these studies. Future analyses are warranted to examine these findings in light of IDSA clinical practice guidelines for patients with diarrhea which recommend the performance of selective testing of stool specimens.